

**Minutes from the Dental Advisory Committee meeting
November 14, 2003 at the VDA**

Committee Members Present:

Dr. Fred Hamer
Dr. Lynn Browder (for Dr. Day)
Dr. Terry Dickinson
Dr. Thomas Spillers
Dr. Carl Atkins
Dr. Joe Paget
Dr. Steve Riggs
Pat Finnerty
Nicole Pugar
Neal Graham
Chuck Duvall
Mary Mitchell
Jim Cohen
Sally Rice

Guests:

Dr. Tegwyn Hughes

The meeting opened with Mr. Cohen distributing copies of the 2003 Dental Report in DRAFT form.

Mr. Finnerty provided a few comments on the report but asked members to take their time in reading it and in providing feedback. He emphasized the fact that bringing dental back in-house from the MCOs would require much work – from in-house support staff and equipment to having an expanded dental network in place. The timeline for the date for bringing dental back in-house is somewhat questionable in the report since all of the resources (i.e., administrative staff, call center, adequate provider network) have to be in place for everything to work. The committee will be relied on for network support. Unfortunately, the budget situation is such that there is not much chance for an increase in fees making it even more of a challenge to obtain an increased provider network.

Mr. Duvall wanted to know if there would be resistance from the MCOs by removing dental services. Mary Mitchell responded that there would be no legislative opposition from the MCOs. Their only concern was that other services might start being taken away from the managed care arena.

Dr. Paget made the point that in spite of his initial opposition to managed care, it's become apparent that there are some things that MCOs do better than Medicaid. Examples of these things include more concise remittance advices and better on-line eligibility verification systems and a more responsive provider call center.

It was stressed by all committee members that dental needs to be handled by a one-vendor system. There are too many inconsistencies when dealing with multiple vendors.

Dr. Spillers stated that while it seems that DMAS is moving towards getting uniformity back into the program, we need to ensure that the uniformity isn't 20 years old. We need to ensure that we can accept current industry standard claim forms, etc.

Mr. Cohen reported that DMAS is committed to changing the automated claims processing system to accept both the 2000 and 2002 ADA claim forms in a format similar to that used by commercial payers. He reported that the request for a system enhancement will be forwarded to our fiscal agent, First Health Services.

Mr. Cohen also stated that the problems with the remittance advices were being addressed. However, some of the problems with the remittance advices have been created due to HIPAA requirements. HIPAA has made the development of the entire system more cumbersome and complex.

At the conclusion of the meeting, committee members were asked to send comments on the report to Sally Rice no later than December 1 as the report is due to the House and Senate money committees by December 15.

No date was set for the next meeting.